EXHIBIT

1

IN THE COURT OF COMMON PLEAS OF WESTMORELAND COUNTY, PENNSYLVANIA CIVIL DIVISION – CUSTODY/DIVORCE

Shanni vs.	Soyder, Plaintiff, Defendant.)	NO.: <u>Lel 1</u>	OF 20 <u>/8</u> D		M 6-243 6	
	PETITION .	AND VEF	RIFICATION FOR	IN FORMA PAUP	ERIS Z	0:2	

TO THE HONORABLE COURT:

I hereby certify that I am without financial resources to pay the fees and costs associated with my family law case and therefore request to proceed in forma pauperis. In support of my Petition, I attach a verification which fully and truthfully describes my current income and financial condition. I attach the required documents and have removed all but the last four digits of all social security numbers on the following documents: (Check all boxes that apply)

- My most recent year to date pay stub and the pay stub of any adults who reside with me.
- If pay stubs are not available, a notarized statement from my employer and a notarized statement from the employer of any adults or reside with me, indicating my and their monthly wages.
- If not employed, a copy of the most recent spousal support, retirement, disability, social security, workers' compensation or unemployment compensation or other income or benefits.
- I am unemployed and receive no other income or benefits.
- I applied for pro bono representation.

WHEREFORE, I request to proceed In Forma Pauperis, without the need to pay fees and costs in the above-captioned case. I verify that the statements made in this Petition are true and correct. I understand that false statements made are subject to the criminal penalties under 18 Pa. C.S. §4904 (crime of unsworn falsification to authorities).

Respectfully submitted,

0/23/19 Date

Signature of In Forma Pauperis Petitioner

3/23/2018 - petition gracefed.
Coets may be placed on defendant,
but plantiff's April States grant stos 0000001

IN THE COURT OF COMMON PLEAS OF WESTMORELAND COUNTY, PENNSYLVANIA CIVIL DIVISION – CUSTODY/DIVORCE

vs.	Plaintiff,) NO.:OF 20
	VERIFICATION FOR IN FORMA PAUPERIS
1	I am the Plaintiff/Defendant [CIRCLE ONE] in the above matter and because of my financial condition; I am unable to pay the fees and costs of prosecuting or defending the action or proceeding.
2	I am unable to obtain funds from anyone, including my family and associates, to pay the costs of
	litigation.
3	I represent that the information below relating to my ability to pay the fees and costs is true and
	correct:
	(a) Name: Shanni Snydry
	Address: 14390 125 11 30
	N. Huntingdon, PA 5692
	Email: Shank 2018@ Telephone: 304 830 7510
	(b) Employment: Protonnail. Com
	If you are presently employed, state
	Employer:
	Address:
	Email: Telephone:
	Salary or wages per month:
	Type of work:
	If you are presently unemployed, state
	Date of last employment:

Salary or wages per month: ______

Case 22-20823-GLT Doc 589-2 Filed 04/09/24 Entered 04/09/24 16:19:52 Desc Exhibit 1 Page 3 of 5

	Type of work:
Ľ	I ATTACH TO THIS PETITION AND VERIFICATION A COPY OF MY MOST RECENT
	PAY STUB(S) SHOWING MY EARNINGS YEAR TO DATE OR A NOTARIZED
	STATEMENT FROM MY EMPLOYER SHOWING MY WAGES

(e)	Property owned:
	Cash:
	Checking account:
	Savings account:
	Certificates of Deposit:
	Real Estate (including home):
	Motor Vehicle:
	Stocks, bonds:
	Other:



5. I understand that I have a continuing obligation to inform the Court of improvement in my financial circumstances, which would permit me to pay the costs incurred herein.

I verify that the statements made in this affidavit are true and correct. I understand that false statements herein are made subject to the penalties of 18 PA.C.S. § 4904, relating to unsworm falsification to authorities.

_<u>2</u>/13 / 18

Plaintiff/Defendant ICHCLE ONE]

14390 OS R4 3

elephone Number

304 830 7510